

06-29-01

GP/1627/1

Please type a plus sign (+) inside this box →

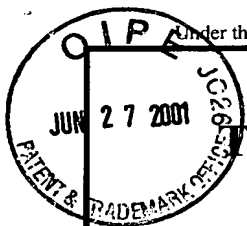
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PTO/SB/21 (6-99)

Approved for use through 09/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>Application Number</b> 09/602,373 <b>Filing Date</b> June 23, 2000 <b>First Named Inventor</b> Li Zhu <b>Group/Art Unit</b> 1627 <b>Examiner Name</b> T.W. Prasthofer		TECH CENTER 1600/2900 JUL 10 2001 RECEIVED		
			<b>Total Number of Pages in This Submission</b> 16	<b>Attorney Docket Number</b> 25636-702

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Version with Markings Showing Changes <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<b>Remarks</b> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		

## SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	Shirley Chen, Reg. No. 44,608, WILSON SONSINI GOODRICH & ROSATI		
Signature			
Date	June 27, 2001	Customer Number:	021971

## CERTIFICATE OF EXPRESS MAILING

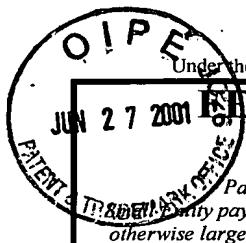
I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated below and addressed to: Commissioner for Patents, Washington, D.C. 20231, on this date: June 27, 2001

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Typed or printed name	Donna L. Hengst		
Signature		Date	June 27, 2001

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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PTO/SB/17 (6/99)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

**FREE TRANSMITTAL**  
**for FY 2001**

Patent fees are subject to annual revision.  
Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

**TOTAL AMOUNT OF PAYMENT** (\$ ) 55.00

**Complete if Known**

Application Number	09/602,373
Filing Date	June 23, 2000
First Named Inventor	Li Zhu
Examiner Name	T.W. Prasthofer
Group/Art Unit	1627
Attorney Docket Number	25636-702

RECEIVED  
JUL 10 2001  
TECH CENTER 1600/2900

**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 23-2415 (Docket No. 25636-702)

Deposit Account Name Wilson Sonsini Goodrich & Rosati

☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other

FEE CALCULATION (continued)					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	55.00
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)				25 Request for Corrected Filing Receipt	
Other fee (specify)				55/110 Terminal Disclaimer	
* Reduced by Basic Filing Fee Paid					<b>SUBTOTAL (3)</b> (\$ ) 55.00

**FEE CALCULATION**

1. **BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
<b>SUBTOTAL (1)</b>					(\$ )

2. **EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
25 -43* = 0	0	0	0
Independent Claims 1 -6** = 0	0	0	0
Multiple Dependent			

**\*\*or number previously paid, if greater; For Reissues, see below**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>					(\$ ) 0

**SUBMITTED BY**

Name (Print/Type)	Shirley Chen	Registration No. (Attorney/Agent)	44,608	Telephone	650-493-9300
Signature	<i>Shirley Chen</i>	Date	June 27, 2001	Customer No. 021971	

**Complete (if applicable)**

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